

B6503-1000144

UNITED STATES OF AMERICA  
COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATIONOFGS FILE NO.  
P/3610-66

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verify that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FUNGICIDAL COMPOSITION COMPRISING A  
PYRIDYLMETHYLBENZAMIDE DERIVATIVE AND A SULFAMIDE DERIVATIVE**

the specification of which is attached hereto, unless the following box is checked:

was filed on October 28, 2004 as United States patent Application Number or PCT International patent

application number PCT/EP2004/013117 and was amended on \_\_\_\_\_ (if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

## Prior Foreign or Provisional Application(s)

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
Europe	03356170.5	31 October 2003	YES <input checked="" type="checkbox"/> NO _____
			YES _____ NO _____
			YES _____ NO _____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

UNITED STATES APPLICATION NUMBER	DATE OF FILING (day, month, year)	STATUS (patented, pending, abandoned)

I hereby appoint customer no. 2352 OSTROLENK, FABER, GERB & SOFFEN, LLP, and the members of the firm, Samuel H. Weiner - Reg. No. 18,510; Robert C. Faber - Reg. No. 24,322; Max Moskowitz - Reg. No. 30,576; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944; Louis C. Dujmich - Reg. No. 30,625, and Douglas A. Miro - Reg. No. 31,643, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence.

SEND CORRESPONDENCE TO: **OSTROLENK, FABER, GERB & SOFFEN, LLP**  
1180 AVENUE OF THE AMERICAS  
NEW YORK, NEW YORK 10036-8403  
CUSTOMER NO. 2352  
DIRECT TELEPHONE CALLS TO:  
(212) 382-0700

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR Thomas WEGMANN	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country) 40764 Lagenfeld, Germany	COUNTRY OF CITIZENSHIP Germany	
POST OFFICE ADDRESS Im Bruchfeld 27, 40764 Lagenfeld, Germany		
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) Richard MERCER	INVENTOR'S SIGNATURE <i>R.T. Mercer</i>	DATE 15-04-2006
RESIDENCE (City and either State or Foreign Country) F-69130 Ecully, France	COUNTRY OF CITIZENSHIP United Kingdom	
POST OFFICE ADDRESS 14, rue du Domaine, F-69130 Ecully, France		

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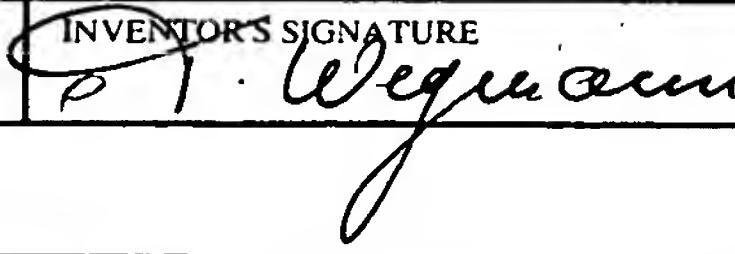
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FULL NAME OF SOLE OR FIRST INVENTOR Thomas WEGMANN	INVENTOR'S SIGNATURE 	DATE 25.4.06
RESIDENCE (City and either State or Foreign Country) 40764 Lagenfeld, Germany	COUNTRY OF CITIZENSHIP Germany	
POST OFFICE ADDRESS Im Bruchfeld 27, 40764 Lagenfeld, Germany		
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) Richard MERCER	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country) F-69130 Ecully, France	COUNTRY OF CITIZENSHIP United Kingdom	
POST OFFICE ADDRESS 14, rue du Domaine, F-69130 Ecully, France		

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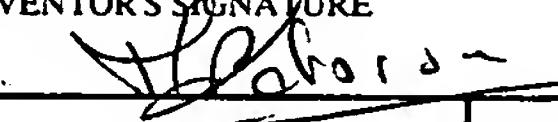
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FULL NAME OF SOLE OR FIRST INVENTOR Thomas WEGMANN	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country) 40764 Lagenfeld, Germany	COUNTRY OF CITIZENSHIP Germany	
POST OFFICE ADDRESS Im Bruchfeld 27, 40764 Lagenfeld, Germany		
FULL NAME OF SECOND JOINT INVENTOR (IF ANY) Richard MERCER	INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country) F-69130 Ecully, France	COUNTRY OF CITIZENSHIP United Kingdom	
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FULL NAME OF THIRD JOINT INVENTOR, IF ANY Marie-Pascale LATORSE		INVENTOR'S SIGNATURE 	DATE 21 April 2006
RESIDENCE (City and either State or Foreign Country) F-69490 Saint Romain de Popey, France		COUNTRY OF CITIZENSHIP France	
POST OFFICE ADDRESS Lieu Dit "La Poste" - RN7, F-69490 Saint Romain de Popey, France			
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country)			COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS			
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country)			COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE (City and either State or Foreign Country)			COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS			